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Application No.	10/750,182
Filing Date	December 31, 2003
First Named Inventor	Don J. Nguyen
Group Art Unit	2821
Examiner Name	Not Yet Assigned
Attorney Docket Number	42P17637

Please change the Correspondence Address for the above-identified application to:						
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associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124) I am the: ☐ Applicant/Inventor. ☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) ☐ Attorney or Agent of record. Registration Number 39,926.						
Typed or Printed Name Gregory D. Caldwell, Reg. No. 39,926						
Signature						
54.0	e 16, 2004					n-
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*						
* Total of forms are submitted.						
Based on PTO/SB/122 (09-03) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 02/10/2004. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450						

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TO ANOMITTAL FORM	Application No.	10/750,182			
TRANSMITTAL FORM	Filing Date	December 31, 2003			
(to be used for all correspondence after initial filing)	First Named Inventor	Don J. Nguyen			
	Art Unit	2821			
	Examiner Name	Not Yet Assigned			
Total Number of Pages in This Submission 5	Attorney Docket Number	42P17637			

ENCLOSURES (check all that apply)							
Fee Transmittal	Form	Drawing(s)		After Allowance Communication to Group			
Fee Attac	hed	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Re	esponse	Petition		Appeal Communication to Group Appeal Notice, Brief, Reply Brief)			
After Fina Affidavits/	l declaration(s)	Petition to Convert a Provisional Application		Proprietary Information			
Extension of Tim	Power of Attorney, Revocation Change of Correspondence Address		Status Letter Other Englosure(c)				
Express Abandonment Request		Terminal Disclaimer		Other Enclosure(s) (please identify below):			
Information Disclosure Statement Request for Refund		Request for Refund	-	return postcard			
PTO/SB/08		CD, Number of CD(s)					
Certified Copy of Priority Document(s)							
Response to Mis	ssing Parts/ ication	Damada					
Basic Filing Fee		Remarks		:			
Decla	ration/POA						
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Gregory D. Caldwell, Reg. No. 39,926							
or Individual name BLAKELY, SOKOWNF, TAYLOR & ZAFMAN LLP							
Signature							
Date	Date June 16, 2004						
	CERTIFICATE OF MAILING/TRANSMISSION						
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.							
Typed or printed name Annie G. Pearson							
Signature	Signature Date June 16, 2004						

TRANSMITTAL for FY 2004 Effective 01/01/2004. Patent fees are subject to annual revision.			Complete if Known			
			Application Number	10/750,182		
			Filing Date	December 31, 2003		
			First Named Inventor	Don J. Nguyen		
Applicant claims small entity status.	See 37 CFR 1.27.		Examiner Name	Not Yet Assigned		
			Art Unit	2821		
TOTAL AMOUNT OF PAYMENT	(\$)	0.00	Attorney Docket No.	42P17637		

METHOD OF PAYMENT (check all that apply)		<u>.</u>		FE	E CALCULATI	ON (continue	ed)	
☐ Check ☐ Credit card ☐ Money ☐ Other ☒ None	3. A	DDITIO	NAL	FEES	3			
Deposit Account	Large	e Entity	Sma	II Entity	, -			
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee	Description		Fee Paid
Account Number 02-2666	1051	130	2051	65	Surcharge - late filing	•		
Deposit	1052	50	2052	25	Surcharge - late provi	sional filing fee or		
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	2053	130	2053	130	Non-English specifica	tion		
The Commissioner is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for		ation	
Charge fee(s) indicated below Credit any overpayments	1804	920 •	1804	920 *	 Requesting publication 	n of SIH prior to		
Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	1805	1,840*	1805	1,840 *	Requesting publication	n of SIR after		
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account	1251	110	2251	55	Extension for reply wit	hin first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply wit	hin second month		
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply wit	hin third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply wit	hin fourth month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1255	2,010	2255	1,005	Extension for reply wit	hin fifth month		
1001 770 2001 385 Utility filing fee	1404	330	2401	165	Notice of Appeal			
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in suppo			
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hear			
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a p		ng	
1005 160 2005 80 Provisional filing fee	1452	110 1,330	2452	55 665	Petition to revive - uni			
SUBTOTAL (1) (\$)	1453	1,330	2453	665	Utility issue fee (or rei			
A SYTDA OLAMASSEO	1501 1502	480	2501 2502	240	Design issue fee	3300)		
2. EXTRA CLAIM FEES Extra Fee from Cairns below Fee Paid	1503	640	2503	320	Plant issue fee			<u> </u>
Total Claims . 20° = X	1460	130	2460	130	Petitions to the Comm	nissioner		
Independent Signature 3 = X = =	1807	50	1807	50	Processing fee under	37 CFR 1.17(q)		
Multiple Dependent =	1806	180	1806	180	Submission of Inform	ation Disclosure Str	mt	
Large Entity Small Entity	8021	40	8021	40	Recording each pater property (times numb			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	1809	770	1809	385	Filing a submission af			
1202 18 2202 9 Claims in excess of 20	1005				(37 CFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional in examined (37 CFR §			
1203 290 2203 145 Multiple Dependent claim, if not paid	1801	770	2801	385	Request for Continued	d Examination (RCI	≣)	
1204 86 2204 43 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited			
1205 18 2205 9 **Reissue claims in excess of 20 and over	Other fe	e (specify)	ı	Chan	of a design application age of Address of Corre			0.00
original patent	1							
SUBTOTAL (2) (\$)		l by Basic Filin	g Fee Pai	t	:	SUBTOTAL (3)	(\$)	0.00
**or number previously paid, if greater, For Reissues, see below	<u> </u>							
SUBMITTED BY		egistratio	on No	т-		i "" 1	lete (if applica	
Name (Print/Type) Gregory D. Caldwell		ttomey/Age		3	39,926	Telephone	(503) 68	
Signature	Date 06/10				5/04			